

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
09/980,250

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	1					
3	0					
4	0					
5	0					
6	1					
7	0					
8	0					
9	0					
10	0					
11	0					
12	0					
13	0					
14	0					
15	0					
16	0					
17	0					
18	0					
19	0					
20	0					
21	0					
22	0					
23	0					
24	1					
25	1					
26	1					
27	1					
28						
29						
30						
31						
32						
33						
34						
35						
36						
37	1					
38	1					
39	1					
40						
41	1					
42	1					
43	1					
44	1					
45	1					
46	1					
47						
48						
49						
50						
TOTAL IND.	1					
TOTAL DEP.	22	↓	↓	↓	↓	↓
TOTAL CLAIMS	23					

PTO-1360 (3-76)

DO NOT USE FOR ADDITIONAL CLAIMS OR AMENDMENTS

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